

ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

St. Joseph Hospital and Health Center

City: Kokomo County: Howard Year: 2003

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	10	206	2,223	\$34,147
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	69	3,349	14,136	\$7,802
Neonatal Intermed	4	20	85	\$6,577
Obstetrics	19	833	2,012	\$4,470
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	8	342	1,489	\$13,305
Substance Abuse	18	414	5,313	\$25,494
Swing Beds	NA	0	0	\$0
Other Services	8	354	1,332	NA
Acute Subtotal	136	5,518	26,770	NA
Normal Newborn	19	790	1,774	\$4,031

II. Outpatient Visits			
Circulatory System	5,193	Digestive System	3,183
Endocrine System	4,994	Injuries and Poison	1,547
Mental Disorder	10,216	Musculoskeletal	4,186
Neoplasms	2,762	Nervous	1,414
Respiratory	2,168	Urinary	3,747
Other/Unknown	10,825	Total Visits	50,235
Number of Visits to Emergency Department			20,064
Percent of Emergency Department Visits of Total Visits			39.9%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	Y - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
N - Coronary Care Unit	Y - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	Y - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	N - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
Y - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	N - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
Y - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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[Health Care Regulatory Services](#)

[2003 Hospital Services Main Page](#)